Group Insurance Commission Public Hearing

March 1, 2006



Your Benefits Connection



The GIC's Mission

Continue to offer comprehensive benefits to employees, retirees and their dependents



Keep costs as low as possible



Health Care Quality Gap Only 54.9% of Patients Get Highest Quality of Care

Quality Care Gap Varies by Medical Condition

- 75.7% Breast Cancer
- 73.0% Prenatal care
- 68.0% Coronary artery disease
- 64.7% Hypertension
- 57.3% Osteoarthritis
- 53.5% Asthma
- 45.4% Diabetes mellitus
- 39.0% Community-acquired pneumonia





Double Digit Premium Increases Continue

- New technologies
- New drugs
- Direct to consumer advertising
- Increased consumer demand
- Lower reimbursements from government "safety net" programs
- Rising health care wages
- Aging population





Health Care Premiums Continue to Escalate

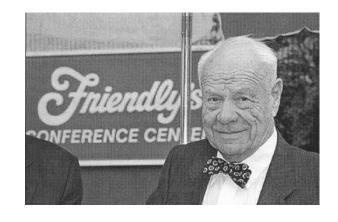


Most health care premiums expected to increase by more than 10% this year

This is the sixth consecutive year of double digit increases



Other Employers' Response



The Boston Globe

September 14, 2005

Fewer Companies Offering Health Benefits as Costs Rise

January 25, 2006

Friendly's Slashes Health Benefits

- Maximum annual benefit of \$1,000 or \$2,000 for outpatient care
- •\$100 per day towards inpatient hospital care

33% of employers with 5,000 or more employees offer high deductible plans of at least \$1,000 single or \$2,000 family





Other Employers' Response

(continued)

Employer Actions
Drive Health Costs
For Retirees Higher

December 30, 2004

More than half of large companies that offer retiree health care have capped what they will spend on their retirees' health benefits.



Employers Charging Smokers Extra for Health Insurance

February 17, 2006

The practice of smoker surcharges is a significant trend.





The GIC's Approach

- Decision to keep co-pay and deductible increases as low as possible; choice as wide as possible
- Decision to give incentives to patients first, providers in the future
- The GIC's Clinical Performance Improvement Initiative instituted to influence the delivery system:
 - □ Variability in physician and hospital care
 - □ Rising health care costs
 - □ Quality issues



Over the Last Two Years We Began with Several Select & Save Plans

- Selective networks
- Tiered hospital networks
- Built a comprehensive database for all plans to use now and in future years



This Year's Programs Expanded to Include Physician Tiers

- Each plan put together its own benefit design consistent with the CPI Initiative
- Members retain access to all of the providers in our health plans' networks

These changes do not apply to any GIC Medicare plan or the Commonwealth Indemnity Plan (Basic)





Commonwealth Indemnity Community Choice

Unicare, the medical benefits administer of this plan, will be tiering all physicians. Members will pay lower co-pays if they seek care from more efficient and effective providers.







Commonwealth Indemnity Plan PLUS

Unicare, the medical benefits administer of this plan, will be tiering all physicians. Members will pay lower co-pays if they seek care from more efficient and effective providers.







Select & Save Plans

Fallon Community Health Plan – Direct Care

The Fallon Community
Health Plan – Direct Care
is already a Select & Save
Plan that uses a selective
provider network.







Fallon Community Health Plan – Select Care

Fallon is establishing a two-tier Primary Care Physician (PCP) network for this plan.

Members who seek care from preferred tier PCPs (called Value Plus) will pay a lower co-pay than members seeking care from a non-preferred tier PCP (called Value).

Additionally, the tier of your PCP will affect co-payments for other services.







Harvard Pilgrim Health Care

This Point of Service (POS) plan will change to a Preferred Provider (PPO) plan, which does not require selection of a Primary Care Physician (PCP) or referrals to see a specialist.

The new plan, called the Harvard Pilgrim Independence Plan, will institute a two-tier network for five physician specialties. These specialists will be tiered based on the cost-effectiveness of their practices. Members seeing a preferred specialist will pay a lower copay than for non-preferred specialists and other specialists that are not subject to tiering.







Health New England

HNE will implement a threetier Primary Care Physician (PCP) network. Family Practice/Internal Medicine and Pediatricians will be tiered based on the costeffectiveness of their practice.







Navigator by Tufts Health Plan

Tufts Health Plan will institute a twotiered network for surgical specialists. Members will pay a lower co-pay for using a surgical specialist whose primary affiliation is with a tier 1 hospital versus using a surgical specialist whose primary affiliation is with a tier 2 or tier 3 hospital and other specialists that are not subject to tiering.







Neighborhood Health Plan

NHP will offer two plans, their standard HMO and a Select & Save Plan called NHP Community Care. This plan has a selective network with primary care based at NHP's 49 Community Health Centers and 14 Harvard Vanguard Medical Associates sites.







All Non-Medicare Health Plans

Elimination of physician office visit copay cap of 15 calendar year visits

All Non-Medicare HMO Plans

 Elimination of mental health/substance abuse office visit co-pay cap of 15 calendar year visits





Commonwealth Indemnity Community Choice

- Early intervention services improved: \$5,200 per child per year up to \$15,600 lifetime maximum
- In-network skilled nursing home services improved: 80% coverage up to a maximum of 45 days

Commonwealth Indemnity Plan (Basic)

- Early intervention services improved: \$5,200 per child per year up to \$15,600 lifetime maximum
- In-network skilled nursing home services improved: 80% coverage up to a maximum of 45 days
- Outpatient surgery co-pay: \$75 per occurrence





Commonwealth Indemnity Plan PLUS

- Early intervention services improved: \$5,200 per child per year up to \$15,600 lifetime maximum
- In-network skilled nursing home services improved: 80% coverage up to a maximum of 45 days





Prescription Drug Benefits

for Commonwealth Indemnity Community Choice, Commonwealth Indemnity Basic, Commonwealth Indemnity Medicare Extension (OME) and Commonwealth Indemnity PLUS (Express Scripts):

Mail order 90-day supply co-pay: \$90 non-preferred brand name drug





Mental Health – Substance Abuse Benefits

for Commonwealth Indemnity Community Choice, Commonwealth Indemnity Basic, Commonwealth Indemnity PLUS, and Navigator by Tufts Health Plan (United Behavioral Health):

- In-network outpatient care co-pay: \$15 for all visits
- Employee Assistance Program: No co-pay for first three visits; thereafter, use mental health benefit
- Medication management visit co-pay: \$10





Fallon Community Health Plan – Direct Care

Outpatient surgery co-pay: \$75

Health New England

- Inpatient hospital care co-pay all network hospitals: \$200 per admission
- CT scans, MRIs, MRAs and PET scans co-pay all network facilities: \$50





Harvard Pilgrim Independence Plan

- Inpatient hospital care and outpatient surgery co-pay maximums: 4 per calendar year
- Prescription drug mail-order 90 day supply non-preferred brand drug co-pay: \$90
- In-network outpatient mental health/substance abuse care visit co-pay: \$15 all visits
- In-network mental health/substance abuse medication management visit co-pay: \$10
- Early intervention services enhanced: \$5,200 per child per year up to \$15,600 lifetime maximum
- In-network skilled nursing home services: 80% coverage up to a maximum of 45 days





Navigator by Tufts Health Plan

- Pediatric Hospital Inpatient Admission co-pay: \$200 tier 1, \$400 tier 2
- Inpatient hospital care and outpatient surgery copay maximums: 4 per calendar year
- Prescription drug retail 30-day supply/mail order 90-day supply co-pay tier 3 drugs (no change in tier 1 or tier 2 co-pays): \$40/\$90
- Early intervention services enhanced: \$5,200 per child per year up to \$15,600 lifetime maximum
- In-network skilled nursing home services: 80% coverage up to a maximum of 45 days

Your Benefits Connection

Commonwealth of Massachusetts
Group Insurance Commission



NHP Care (formerly called Neighborhood Health Plan)

- Physician office visit co-pay: \$20
- Emergency room visit co-pay: \$50
- Inpatient hospital care admission co-pay: \$300
- Outpatient surgery co-pay: \$100
- Prescription drug retail 30-day supply co-pay (no change in generic co-pay) brand/ non-preferred brand: \$25/\$45
- Prescription drug mail-order 90-day supply co-pay (no change in generic co-pay) brand/non-preferred brand: \$50/\$135





Other Benefit Changes – Life Insurance

The GIC has selected The Hartford as its new life insurance carrier effective July 1, 2006. Other changes effective July 1, 2006:

- Life and Accidental Death and Dismemberment benefits will be enhanced to cover acts of war or terror benefits.
- Optional life insurance rates will decrease by an average of 7.7%.
- The GIC will eliminate the one-year waiting period to increase or enroll in optional life insurance coverage. Active state employees will now be able to apply for additional Optional Life and Accidental Death and Dismemberment benefits at any time with proof of good health.
- The UnumProvident LifeBalance® Program will be replaced by the Hartford's Beneficiary Assist Program, which provides counseling, legal, and financial assistance via telephone and in person after the death of a family member.





Other Benefit Changes

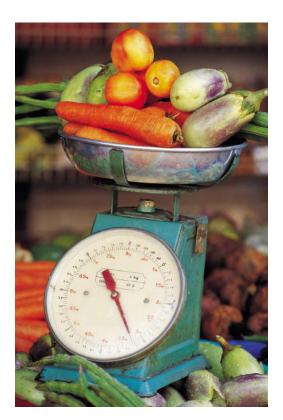
- Dental/Vision Plan for Managers, Legislators, legislative staff and certain Executive Office Staff: No increase in monthly premiums in FY07.
- Long Term Disability Plan: No increase in monthly premiums in FY07.
- Retiree Dental Plan: No increase in monthly premiums in FY07.





Weigh Your Options

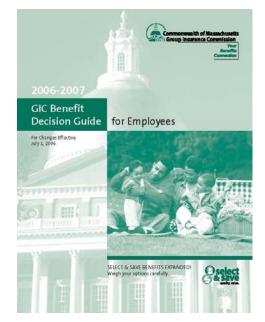
- Annual Enrollment gives you an opportunity to review your benefit selections and make changes if you desire.
- Wednesday, April 19 –
 Wednesday, May 17 for changes effective July 1, 2006

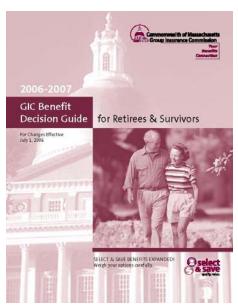




Choosing a Health Plan

Read your Benefit Decision
Guide and For Your
Benefit newsletter —
delivered to agencies
(employees) and homes
(retirees/survivors) the
second week of April
See our website
www.mass.gov/gic









Choosing a Health Plan

- Contact your existing health plan to find out about their physician tiers and which tiers your doctors are in
- If one of your doctors is not in a preferred tier, consider whether you would like to switch physicians, pay a higher co-pay or consider another health plan – or, talk to your doctor
- Contact other health plans you may be interested in for information on their tiers





Attend a GIC Health Fair

- 19 Health Fairs
- 3 Saturday dates
- Schedule is on our website, and will be in the Benefit Decision Guides and FYB newsletter







Make Your Decisions No Later Than Wednesday, May 17

- Active employees give forms to your
 GIC Coordinator
- Retirees/Survivors –
 Send forms to the
 GIC and HMO (if an HMO selected)





